



Attorney Docket No.: 0120104C

## AMENDMENT COVER SHEET

IN RE APPLICATION OF: Sacca, et al.

SERIAL NO.: 10/600,491 FILED: 6/20/2003

FOR: Electronic Inductor with Transmit Signal Telephone Line Driver

HONORABLE COMMISSIONER FOR PATENTS  
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.

☐ The fee has been calculated as shown below:

☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	110.00	55.00	\$
SECOND MONTH AFTER TIME PERIOD SET	420.00	210.00	\$
THIRD MONTH AFTER TIME PERIOD SET	950.00	475.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,480.00	740.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

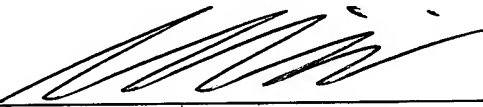
	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	20	MINUS **20	* = 0	x 18	x 9	\$
INDEPENDENT	3	MINUS ***4	* = 0	x 86	x 43	\$
First presentation of multiple dependent claim				+ 290	+ 145	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- \* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.  
\*\* If the number of Total Claims previously paid for is less than 20, write "20" in this space.  
\*\*\* If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

- ☐ Total fee for Supplemental Information Disclosure Statement \$
- ☐ Enclosed is the total fee of \$ 0.00 (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-0731 in the amount of \$
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

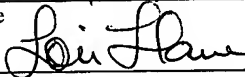
Date: 9/30/03

By:   
Michael Farjami, Reg. No. 38,135

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on:

Date 9/30/03

Signature 

Typed or Printed Name of Person Mailing Paper and/or Fee  
Lori Llave

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

<p>Applicant(s): <b>Sacca, et al.</b></p> <p>Application Serial No.: <b>10/600,491</b></p> <p>Filed: <b>June 20, 2003</b></p> <p>Title: <b>ELECTRONIC INDUCTOR WITH TRANSMIT SIGNAL TELEPHONE LINE DRIVER</b></p>	<p>Group Art Unit: 2644</p> <p>Examiner: Not Assigned</p>
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**SUPPLEMENTAL PRELIMINARY AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Madam/Sir:

Please enter the following amendments and remarks in the above-captioned application.